*207. *[The questioner (Shri Sukomal Sen) was absent. For ans-xoer,* vide *col.* 35 infra.]

'208.. [The questioner (Shri *Naresh C. Puglia.) was absent. For answer,* vide *col.* 36. infra.]

*209. *[The* questioners (Shri Suresh *Kalmadi and Shri Kishor Mehta) were absent. For answer,* vide co!. I 36-37 infra.]

Herbal drug for malaria

•210. SHRI PARVATHANENI UPENDRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether any research project has been undertaken to develop a herbal drug for treatment of malaria; and

(b) if so, what are the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) The Central Council for Research in Ayurveda and Siddha had \ undertaken research and trials for evolving a herbal drug for the treatment of malaria since 1979 onwards and has patented the same as "AYUSH-64" through National Research Development Corporation. Several pharmacies have purchased the know-how for manufacturing the drug and the drug is already available in the market.

The Central Council for Research in Unani Medicine is also conducting trials of drugs for the treatment of malaria.

SHRI PARVATHANENI UPENDRA: Slir, I would like to know from the hon. Minister why this particular name "AYUSH-64" is given. Is there any particular significance for that? Does it mean that the people will live for 64 years?

Secondly, which are the other diseases for which the Central Council for Research in Ayurveda and Siddha is working on similar drugs?

SHRI P. V. NARASIMHA RAO; I really cannot say why it fe called '64' and not 65. Probably they go on taking up these researches subject-wise and they allot some numbers, but I am not quite sure and I do not think that is such a material thing.

Thlls AYUSH-64 has been tried in many places, and I am glad to say that it has been established that the results are very very encouraging. Now, what remains to be done is to make use of it on a very large-scale. Now, in the case of spraying and other thlings which we are undertaking there is an immunity developed. Therefore, there is a limit beyond which whatever malaria programmes we have at the moment are not really proving efficacious. So, in all our Indian systems whatever research has been done and has been found to be effective, the proposal now is to make use of it On a large scale. We are at that polint. I cannot say that it has been done on a large scale, because there is some resistance to this on the part of the authorities in charge of the Malaria programme. Now, it is a matter of convincing them and creating the machinery for really extensive use of such medicines. On the other hand the Unani system—as I had occasion to answer a questlion here—has come up with a drug specifically for leuco-derma. It has been proved efficacious. So, like that in the Indian systems we do come across certain drugs which have been tested and found effieaclious. I could give names of other drugs and diseases, but I do not have that list with me readily. Only in regard to Malaria, which is number one problem lin this country, I think we are hopeful and are on the eve of a real breakthrough. And if that proves successful on a largescale then we would have got over this problem for all time.

SHRI PARVATHANENI UPENDRA; Is there any proposal before the Government to distribute this drug free of charge to the people particularly of the poorer sections, in the Malaria-prone areas?

SHRI P. V. NARASIMHA RAO: Most of the drugs, as we know, in the hospitals and in the primary health centres are free. So, this would be part of that. I would have it looked into. When we really take it up on a large-scale, naturally it would be affordable. I cannot say whether it will be absolutely free. Maybe, it will be free, but we have not yet taken a decision on that.

SHRI P. V. NARASIMHA RAO: This is a specific question and I have come with a

श्री जगदम्बी प्रसाद यादव : मैं माननीय मंत्री जी से जानना चाहता हूं कि आयुर्वेद के अनुसंधान में, जिसका मैंने एक बार प्रयोग करके देखा था कि कालाजार में और मस्तिष्क ज्वर में भी काफी उपयोगी रहा, तो आयुर्वेद की रिसर्च में सातवीं पंच-वर्षीय योजना में कितना रुपया दिया गया है? विशेष कर के अगर मलेरिया में कुछ निकाला गया है, तो उस पर कितना दिया गया है? मैं आयुर्वेद का पूछ रहा हूं और अगर कामन बताना हो, तब सभी भारतीय पद्धतियों का बतायें। इन्होंने सिद्धा की भी बात की। सिद्धा पद्धति का दक्षिण में बहुत बड़ा प्रभाव है, उस पर आपने कोई उल्लेखनीय बात नहीं की है।

specific answer. But if more details are needed on the money which we have been spending on research, I could give that to the hon. Member. I would say in general that I am not fully satisfied with either the research or the outlays done by us On the Indian systems. I have given this information to the Parliament already. We do want to step up our effort on our research and our outlays on the Indian systems of medicines to a considerable extent, but that, I am afraid, wlill be possible only in the next Plan. We are preparing for that.

श्री जगदम्बी प्रसाद यादव : मलेरिया की रिसर्च पर जो दिया गया है ... (**व्यवधान**)

SHRI P. V. NARASIMHA RAO: I don't have that exact figure on Ayurveda, but because it has been tested and proved efficacious, our concern will now be to propagate it and to get it used on a large-scale.

श्री अश्विनी कुमार : माननीय सभापति महोदय, पिछले कई वर्षों से इस प्रकार के कई अनुभव आ रहे हैं कि आज जो सरकार के अन्दर राजतंत्र बैठा हुआ है, अफसरान बैठे हुए हैं उनमें अधिकांश एलोपैथिक डाक्टर्ज हैं और इसलिए आयुर्वेद, यूनानी और होम्योपैथी की अगर कोई बात आती है तो उसको नम्बर दो सिटीजन या कूड़े की टोकरी में डाल दिया जाता है। यह एक बड़ा अशुभ लक्षण है, जैसा अभी मंत्री महोदय ने कहा कि यूनानी में लाइकोडर्मा की दवा आती उसका भी प्रचार प्रसार नहीं हो सका। मैं सरकार से जानना चाहता हूं कि सरकार के अन्दर जो मेंटेलिटी आती है जो उसकी ब्रेक लगती है उसको तोड़ने के लिए सरकार क्या करेगी? दूसरे, क्या सरकार स्वयं इन दवाओं को बनाकर सस्ते दाम पर जनता में वितरित करने का प्रयास करेगी?

श्री पी० वी० नरसिंह राव : माननीय सदस्य ने दवाएं बनाना अभी तो शुरू नहीं किया है। यह आयुष-64 दवा जो है इसका अभी 4 मैनुफैक्चरर्ज बना रहे हैं। इसलिए मैं नहीं समझता कि जहां तक दवाएं बनाने का प्रश्न है उसमें कोई अड़चन या कठिनाई होगी। अब रही यह बात कि इसमें जो अफसरान बैठे हुए हैं उनको हमदर्दी नहीं है हमारे भारतीय सिस्टम से, यह बात कहीं-कहीं सही हो सकती है और कहीं इसका कारण भी हो सकता है। मैं बताना चाहता हूं कि

उनके मन में ऐसी कोई भावना नहीं है कि इस चीज से दुश्मनी बरती जाए। उनका एक सिस्टम है जिसमें वह ट्रेंड हुए हैं। किसी दवा के बारे में राय देनी हो, उनका परीक्षण करना हो तो वह समझते हैं कि उन्होंने जो सोचा है उसके हिसाब से यह ठीक नहीं बैठता है। यह तो एक दूसरे को समझने की बात है और उनको समझने की बात है और साथ ही आयुर्वेद वगैरह जो हमारे सिस्टमज हैं उनके लोगों को भी उनके साथ बैठा कर समन्वय करने की बात है। उसी कोशिश में हम लगे हुए हैं।

DR. G. VIJAYA MOHAN REDDY: Sir, to family planning there are several Ayurvedic drugs which have found successful lin held trials and this is most acceptable to the Indian people also. May I know from tne Minister what steps the Government have taken in using Ayurvedic drugs extensively in family planning programme?

SHRI P. V. NARASIMHA RAO: Sir, I am afraid on family planning side whate«'€!• test.^ hp.ve been done, at the moment I cannot say that there is any definitive or conclusive evidence. But, I think, we are on the point of getting some good evidence which can lead to some results and something is being done in Chandigarh. In that area there is one herb from the forests and they have done some research on it. This we have done for the last 20 years but I am sorry to say that nothing conclusive has come out. Maybe now'we would be able to do that and in case it really proves efficacious, I think ive will go in a arge enough way. But at the moment it is not yet final.

SHRI GHULAM RASOOL MATTO: Mr. Chairman, Sir, making drugs in Ayurvedic and Homoeopathic syutems wSth regard to malaria is most welcome. But the fundamental point with regard to eradication of malaria should not be lost sight of, that is, prevention of breeding of mosquitoes. May I know from the hon. Minister what preventive steps he has taken towards that end?

SHRI P. V. NARASTMHA RAO: Sir, Ayush-64 is meant for men not for mosquitoes. I think, I have explained the other part of environmental sanitation in order to combat malaria many times. We are taking aU the steps and, in fact, in some areas like Keda and in some area in Pondicherry the entire system of meeting malaii$_a$ now consists only of environmental sanitation and it proved successful but it is only on a pilot basis at the moment. We have to think of many methodologies, many types of actions in order to meet this menace.

श्री मीर्जा इर्शादबेग : मान्यवर, जैसा कि आयुर्वेद और यूनानी है यह हमारी अपनी भारतीय पद्धति है। तो मैं माननीय मंत्री जी से जानना चाहूंगा कि जो दवाएं यूनानी में और आयुर्वेद में बनती हैं, मेहरबानी करके कम से कम उनके नाम तो हिन्दुस्तानी में हों. और ऐसा आने वाले दिनों में करने की क्या संभावना है, उसको मुझे क्या आप संतोषजनक जवाब देंगे ?

श्री पी० वी० नरसिंह राव : नाम तो आयुष है।

श्री मीर्जा इर्शादबेग : आपने तो ल्यूकोडर्मा कहा है।

श्री पी० वी० नरसिंह राव : ल्यूकोडर्मा इसलिए कहा क्योंकि वह ज्यादा समझ में आता है। उसका भी संस्कृत नाम है, मैं तो जानता नहीं, कोई न कोई नाम है, अगर वह नाम मैं यहां उल्लेख करूंगा तो शायद समझ न आये।

MR. CHAIRMAN; Mr. Minister, please sit down. Question Hour is over.